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Navy & Marine Corps Medical News
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This service distributes medical news and information to Sailors and Marines, their families, civilian employees, and retired Navy and Marine Corps families. Further dissemination of this email is highly encouraged. Stories in MEDNEWS use these abbreviations after a Navy medical professional's name to show affiliation: MC - Medical Corps (physician); DC - Dental Corps; NC - Nurse Corps; MSC - Medical Service Corps (Navy researchers and administrative managers). Corpsmen and Dental Technician designators are identified in front of their names.

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Headline: Hepatitis C Virus may lurk within certain blood recipients

From: TRICARE Region 11

AURORA, Col. -- If you received a blood transfusion prior to July 1992, the Department of Health and Human Services recommends that you be tested for the Hepatitis C Virus (HCV). Prior to that date, there was no effective test to determine incidence of the disease. The project, called HCV Lookback, will also involve notification of those who received blood just after this test was in use that they should be tested, because donors in the early stages of the disease may not have been identified because of early gestation of the disease. Hepatitis C is a liver disease caused by HCV infection. If you test positive, you may have chronic liver disease. Many who have Hepatitis C have no symptoms and feel well. The most common symptom for some is extreme tiredness. About 4 million Americans are infected with HCV and don't

know it. While severity of the disease differs from person to person, most who have HCV will carry it for the rest of their lives. The disease contributes to cirrhosis of the liver and liver failure for those most affected by the disease in the later stages.

HCV is most commonly spread through exposure to blood; it can also be spread by sex, but this is rare. If you suspect that you may have HCV, you should avoid sharing toothbrushes, razors or other personal care items that may have blood on them; by not donating blood, body organs, tissue or sperm and by covering sores and cuts on the skin. While there is no vaccine available to prevent HCV, there are anti-viral medicines approved for persons with chronic HCV.

Treatment is effective in about 2-3 out of every 10 persons treated. You should check with your doctor as soon as possible if you test positive for HCV.

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Headline: Improved waiver process aids Navy recruiting
By Kimberly A. Rawlings, Bureau of Medicine and Surgery

WASHINGTON -- Navy recruiters no longer have to wait weeks for a response on a medical waiver for a new recruit thanks to a team of diligent Sailors and civilians at the Bureau of Medicine and Surgery (BUMED) in Washington, D.C. With recruitment and retention receiving emphasis in the military, a team of professionals from BUMED's Physical Qualification and Review Division is helping the Navy and Marine Corps meet their recruitment goals by expediting the medical waiver process. They implemented a process that drastically reduces the processing time for a medical waiver from six to eight weeks to less than 24 hours.

The success of the process, which has been in place since October 1998, is credited an improved computer system and an increase in staffing.

"The previous computer system was archaic," said Chief Hospital Corpsman Tom Radovich, medical records analyst in MED-25. He said the old system required the staff to work long hours, including weekends, with no real reduction in the processing time for a waiver.

The team's hard work was recognized by RADM Barbara E. McGann, commander, Navy Recruiting Command, when she presented team members a letter of commendation and plaque for their support of Navy recruiting.

McGann said that the team's resourcefulness and commitment helped the Navy Recruiting Command recruit quality Sailors in a highly competitive military and civilian recruiting environment.

Recognition within one's own command is always noteworthy, but receiving a commendation from outside the command speaks to the excellent medical service provided to the Fleet and the Marine Corps.

"This award is so special because it comes from one of

our major customers in appreciation for the hard work the crew at Med-25 has done to streamline the waiver process system," said team member Master Chief Hospital Corpsman Mary Ann Chandler, administrative officer in MED-25.

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Headline: Naval Hospital Corpus Christi wins Silver Anchor Award
From Naval Hospital Corpus Christi

CORPUS CHRISTI, Texas -- For the second consecutive year, Naval Hospital Corpus Christi has been recognized for its excellence in career information and personnel programs. This year the retention team won the 1998 Silver Anchor Award from the Chief of Naval Education and Training. In 1997, the hospital won the Golden Anchor Award.

The annual Anchor awards are presented to commands for overall excellence in programs that include career information and training, transition assistance and retention, among others.

Receiving this award highlights the team effort among Naval Hospital Corpus Christi, and the Branch Medical Clinics at Ingleside, Kingsville and Fort Worth, Texas. This collaboration ensured excellence in career and retention information, advancements, awards and recognition, family programs and transition assistance, among other activities.

Chief Hospital Corpsman Pamela Powers and Hospital Corpsman Second Class Jonathan Hendricks used innovative methods to offer career counseling and retention team leadership. They produced weekly email information for all hands to assist staff with career choices, and they established a database on all enlisted staff that allowed them to track and target career needs.

In cooperation with the collateral duty career counselors at the three branch medical clinics, Powers and Hendricks provided career information, handled ceremonies for re-enlistments and recognized staff accomplishments. A critical element in their support was the establishment of an in-rate-training course that helped attendees score 5-7 points higher on the 1997-1998 advancement exams.

Receiving the Silver Anchor award was not a "done deal" for the hospital this year. The team's work was in competition with other non-medical commands of similar size. It took the interdisciplinary cooperation among departments and coordination among people from the hospital and branch medical clinics to achieve a second consecutive retention award.

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Headline: Clinical Epidemiology positions available
From: Naval Environmental Health Center Norfolk

NORFOLK, Va. -- The Navy Medical Department has

established Clinical Epidemiology positions for physicians with expertise in epidemiology and informatics to support a growing emphasis on managing the health of our population. The continuing shift toward managed care in the United States, and specifically TRICARE for Department of defense beneficiaries, along with the emergence of more robust automated clinical data systems, has created the opportunity to bring a population-based focus to health care delivery. A population focus does not replace the traditional emphasis on episodic care for acute and chronic medical conditions, but instead provides an additional set of strategies and tools to achieve improvements in the health of entire groups of patients.

The rigorous application of informatics, biostatistics and epidemiology skills, combined with a strong clinical perspective, fosters objective, data-driven contracting and resourcing decisions, reduces practice variation, improves disease management and identifies best clinical practices. Clinical Epidemiology positions currently exist at Military Treatment Facilities where the incumbent assists the commanding officer and the medical staff in applying population-based information to health care delivery. In the future, as the pool of experienced clinical epidemiologists grows, assignments to Healthcare Support Offices, Lead Agents and the Bureau of Medicine and Surgery are possible.

Clinical epidemiologists are now at Naval Medical Center Portsmouth, Va.; Naval Hospitals Bremerton, Wash.; Pensacola, Fla. and Camp Pendleton, Calif. Openings exist at Naval Hospital Camp Lejeune, N.C.; U.S. Naval Hospitals Yokosuka, Japan; Okinawa, Japan; Roosevelt Roads, Cuba; Guam, and Rota, Spain.

Additional billets are planned for Naval Hospitals Jacksonville, Fla.; Great Lakes, Ill.; Beaufort, S.C.; Naval Medical Center San Diego, National Naval Medical Center, Bethesda, Md. and U.S. Naval Hospital Naples, Italy.

Clinical Epidemiology positions require competence in biostatistics, epidemiology and informatics. Normally, a Master's degree in Public Health or comparable training and experience is considered the minimum level of expertise for individuals seeking these positions.

While the initial recruitment for these positions has been from the Occupational Medicine and Preventive Medicine communities, because of their traditional emphasis on population health, the positions are open to all physicians with the described skills and interests. For more information, contact CAPT David Sack, MC, at the Navy Environmental Health Center (757-462-5568, DSN-253-5568, or send email to sackd@nehc.med.navy.mil)

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Headline: TRICARE question and answer

Question: I am currently enrolled in the Uniformed

Services Family Health Plan. How does that program fit into TRICARE?

Answer: If you are enrolled in the Uniformed Service Health Plan or USFHP you cannot participate in TRICARE, and vice-versa, until your enrollment expires. The USFHP is responsible for the total health care needs of its member patients. With a referral from a Uniformed Services Treatment Facility, you may use the local Military Treatment Facility. The USFHP is a managed care program for nonactive duty Uniformed Services beneficiaries, CHAMPUS and Medicare eligibles delivered by Uniformed Services Treatment Facilities, under contract to the Department of Defense to provide care for Title 10 beneficiaries.

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Headline: Healthwatch: 5 a-day nutrition made simple
By Kimberly A. Rawlings, Bureau of Medicine and Surgery

WASHINGTON -- Are you still having trouble meeting the "5-a-day" challenge? It may not be as hard as you think to consume five servings of fruits and vegetables a day. "People are surprised when they find out what a serving is. They think that eating two servings of fruit a day is difficult to do. If they added a six ounce glass of 100 percent fruit juice with breakfast and a piece of fruit as a snack later in the day, they would meet their goal of two servings a day," said LT Laura Greiman, MSC, registered dietician at Naval Medical Center San Diego. The simple challenge of 5 a day is the minimum recommended daily allowance of two fruits and three vegetables. According to the USDA food guide pyramid, two to four fruits and three to five vegetables should be eaten daily.

"Vegetables, especially raw, are always good for snacking. For example, eat some broccoli and carrots with a little low fat ranch dressing and you've got a great low fat, high fiber snack that's chock full of vitamins and minerals," said Greiman.

One serving of fruit equals 1/3 cantaloupe; 3/4 cup or six ounces of juice; 1/2 cup canned fruit; 1/4 dried fruit or one medium fruit, about the size of a tennis ball. A single vegetable serving is one cup of leafy raw vegetables or 1/2 cup raw or cooked vegetables.

Now that you know how small a serving size really is, here are a few tips from the American Dietetic Association to help get the recommended daily allowances and increase your intake of fruits and vegetables to meet the challenge.

- 1. Include fruits and vegetables in your daily diet. Enjoy a six-ounce glass of juice with a delicious bowl of cereal topped with sliced bananas or berries. Have a snack of celery or carrot sticks between meals.
- 2. Fruits and vegetables are portable. Pack an apple, carrot sticks or raisins in the glove compartment, purse or briefcase for a quick boost of energy.

- 3. Keep fruits and vegetables within reach. Put a bowl of fruit on the counter or place them in view when you open the refrigerator.

- 4. Stock up for the week. Keep the refrigerator and cabinets stocked with a variety of fruits and vegetables, fresh, frozen or canned.

Don't think of 5-a-day as a challenge, instead think of it as a simple goal that will inevitably improve your health and quality of life. So, start trying to do it one day, then one week, and eventually, make the 5-a-day program a lifetime goal.

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Comments about and ideas for MEDNEWS are welcome. Story submissions are encouraged. Contact MEDNEWS editor, Earl W. Hicks, at email: mednews@us.med.navy.mil; Telephone 202/762-3223, (DSN) 762-3223, or fax 202/762-3224.

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